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| (11) PURPOSE OF TRIP, REMARKS AND DETAILS (attach receipts/vouchers when required) | | (12) NORMAL WORK HOURS | |
| All airfare paid by employee at her own private expense. | | 0800-1700 | |
| 7/13: Los Angeles Office - meetings | | (13) PRIVATE VEHICLE LICENSE NBR. | |
| 7/15-16: San Jose District Office visit; Oakland District Office visit | | 6ATW241 | |
| 7/20: Los Angeles Office - meetings | | (14) MILEAGE RATE CLAIMED | |
| 7/21-22: Keynote presentation, Orange Co Labor & employ. Relations Association | | .55 | |
| 7/23: Los Angeles Office - meetings | | AGENCY ACCOUNTING OFFICE | |
| 7/6: Los Angeles Office - meetings | | USE ONLY | |
| 7/10, 17, 24 - Furlough Days | | PAID BY REVOLVING FUND CHECK NBR. | |
| (15) I HEREBY CERTIFY That the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California. If a privately owned vehicle was used, and if mileage rates exceed the minimum rate, I certify that the cost of operating the vehicle was equal to or greater than the rate claimed, and that I have met the requirements as prescribed by SAM Sections 0750, 0751, 0752, 0753 and 0754 pertaining to vehicle safety and seat belt usage. | | | |

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| CLAIMANT'S SIGNATURE  | DATE 8/18/09 | (16) SIGNATURE OF OFFICER APPROVING TRAVEL AND PAYMENT  | DATE 9/1/09 |
| (17). SPECIAL EXPENSE AUTHORIZATION-SIGNATURE and TITLE (See Item 17 on reverse)  | | | DATE |